U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

For Official Use Only

## FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended, Father to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

<u> </u>		
1. File Number U - 296 ()	2. Fiscal Year Covered From:	
	01/01/2005 Through: 12/31/2005	
3. Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name / LTON C. MUM. 71	Name COMMUNICATIONS MARKERS FAMERICA  Labor Organization File Number  030209	
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any SuiTE 8	
Street 602 S. 259 ST.	Street 5418 S. 27 ST.	
City WATERLOO	City OMAHA	
State NE ZIP Code + 468169-4616	State NE ZIP Code + 4 (8/107-3492	
5. Position in labor organization. Lo Cal アパモS: フェッブ		

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (oxcept as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, o monetary value from an employer whose employees your organiza	
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income. SERVED ON
Name LUCENT TECHNOLOGIES	JoiNT HEALTH & SAFETY COMMITTEE
Trade Name, if any:	REIMBURSED FOR EXPENSES RELATED  TO ATTENDING MEETINGS HELD 3 TIMES  A YEAR (ONLY AMERICASIN 2005)  7.b. Amount 1295, 26
P.O. Box, Bldg., Room No., if any	A YEAR (ONLY AMERITYS: N 2005)
Street 8742 LUCENT BIND,	\$1295,26
City Highlands RANCH	
State C O ZIP Code + 4 8 0 12 9	

## Signature 15. Signature and verification. The undersigned ceclares, under penalty of Perjury and other applicable panalties of the law, that all of the information

submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)			
Signed Atta Comm	On <u>03-23-06</u> Date	462-359-2732 Telephone Number	